09/411,792

PTO/SB/21 (01-08)
Approved for use through 04/30/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

Application Number

TRANSMITTAL			Filing Date		October 1, 1999		
FORM		First Named Inventor		David A. Edwards			
			Art Unit		2191		
(to be use	ed for all correspondence after	· initial filing)	Examiner Name		T. T. Vo		
Total Numbe	r of Pages in This Submiss	sion 3	Attorney Docket Number S		S1022.80278US00		
	EN	ICLOSURES (Check all	that apply	7)		
χ Fee Transr	mittal Form	Drawing(s)			After Allowance Communication to TC		
Fee /	Attached	Licensing-rela	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences		
Amendmer	nt/Reply	Petition			X Appeal Communication to TC (Notice of Appeal)		
After	Final	Petition to Convert to a Provisional Application			Proprietary Information		
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter		
Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please Identify below):		
Express At	pandonment Request	Request for Refund					
Information Disclosure Statement		CD, Number	of CD(s)				
Certified Conduction Document(opy of Priority (s)	Landsc	ape Table on	CD			
	issing Parts/ Application	Remarks					
	y to Missing Parts under FR 1.52 or 1.53						
	SIGNATI	JRE OF APPLICA	NT, ATTOF	RNEY, OR A	AGENT		
Firm Name	WOLF, GREENFIEL	.D & SACKS, P.0	C.				
Signature	Soft J	Lenn					
Printed name	Scott J. Gerwin						
Date	April 10, 2008			Reg. No.	57,866		

Ī		
ı		Certificate of Electronic Filing Under 37 CFR 1.8
ı		my paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing
ı	system in accordance with § 1.6(a)(4).	\bigcap M W -
ı	D 4 1 4 11 40 0000	Signature (VOO AL) MAC MALL (Filesp M. Mackenzie)
ı	Dated: April 10, 2008	Signature: (Eileen M. MacKenzie)
L		· · · · · · · · · · · · · · · · · · ·

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) SUBMITTED BY A DEPARTMENT OF TRANSPORT	Under the Paperwork Reduction Act of	1995, no person are requ	ired to r	espond to a collectio		······································		control number
FEE TRANSMITTAL For FY 2008 Print Named Inventor First Named Inventor Summer Name T. T. Vo		001111 =00			vn			
For FY 2008 First Named Inventor Examiner Name T. T. Vo Art Unit 2191								
Applicant claims small entity status. See 37 CFR 1.27 Ant Unit 2191 Ant Unit 2191 TOTAL AMOUNT OF PAYMENT (s) 510.00 Attorney Docket No. S1022.80278US00 METHOD OF PAYMENT (check all that apply) Check X Credit Card Money Order None Other (please identify): Deposit Account Depose Account Number 23/2825 Deposit Account Name Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of X Credit any overpayments For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filling fee and the properties of X Credit any overpayments FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (S) Fee (FEE IRANS	WIIIAL	ł			October 1, 199	19	
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (8) 510.00 Attorney Docket No. S1022.80278US00 METHOD OF PAYMENT (check all that apply) Check X Credit Card Money Order None Deposit Account Number Deposit Account Deposit Account Deposit Account Deposit Account Deposit Account Number Deposit Account Number Deposit Account Number Charge fee(s) indicated below Received Tree (s) Fee	For FY 2	800	ŀ	· · · · · · · · · · · · · · · · · · ·	entor	T T Vo		
METHOD OF PAYMENT (check all that apply)	Applicant slaims small ontity etc.	uo Soo 27 CER 1 27						
Check X Credit Card		T			. +		1000	
Check				Attorney Docket	No.	31022.002700		
Deposit Account Deposit Account Number 23/2825 Deposit Account Name Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee (a) charge any additional fee(s) or underpayments of Charge fee(s) indicated below, except for the filing fee fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (s) Fee (s	METHOD OF PAYMENT (check	all that apply)						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Scall Extra Sheets FILING FEES Small Entity Fee (\$) Fe	Check X Credit Card	Money Order	Non	e Other (please identi	fy):		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee X Charge any additional fee(s) or underpayments of fee(s) indicated below, except for the filing fee X Credit any overpayments	Deposit Account Deposit Account	Number: 23/28	325	Deposit /	Account Nam	e: Wolf, Green	field & Sad	cks, P.C.
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments X Credit any overpayments Tee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments X Credit and Credit and Credit X Credit	For the above-identified dep	osit account, the Dire	ctor is	hereby authorize	ed to: (che	ck all that apply)		
Fee Sunder 37 CFR 1.16 and 1.17 Sunder 37 CFR 1.16 and	Charge fee(s) indicate	d below		Charge	e fee(s) in	dicated below, ex	cept for th	ne filing fee
Application Type			ents of	x Credit	any overp	payments		
Pick Part	FEE CALCULATION							
Application Type	1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
Papelication Type	FI		SEA		EXAMI			
Utility 310 155 510 255 210 105 105 105 106 50 130 65 130 65 130	Application Type Fee (\$		Fee (\$)		Fee (\$)		Fees F	Paid (\$)
Plant	Utility 310	155	510	255				
Reissue 310 155 510 255 620 310 Provisional 210 105 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Extra Claims Fee (\$) Fee Paid (\$)	Design 210	105	100	50	130	65		
Provisional 210 105 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$)	Plant 210	105	310	155	160	80		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof (round up to a whole number) x Fee \$\frac{1}{2}\$ Fee Paid (\$\frac{1}{2}\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal Submitted BY Signature Registration No. 57 866 Telephone (\$12 648 8000)	Reissue 310	155	510	255	620	310		
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	Provisional 210	105	0	0	0	0		
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	2. EXCESS CLAIM FEES							Small Entity
Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) Sheets or fraction and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Fee Description Each claim over 20 (including Reiss	ues)						
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal Registration No. 57 866 Telephone 617 646 9000								
HP = highest number of total claims paid for, if greater than 20. Indep. Claims	Multiple dependent claims	-						
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) ———————————————————————————————————	Total Claims Extra Claims	Fee (\$)	Fee P	aid (\$)	<u>M</u>	lultiple Depende	nt Claims	
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal SUBMITTED BY Registration No. 57 866 Telephone 617 646 2000	- =	x =			<u>F</u>	ee (\$) <u>F</u>	ee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal SUBMITTED BY Registration No. 57 866 Telephone 617 646 2000	•	, if greater than 20.						
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 =			Fee P	aid (\$)				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets								
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 =								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 = /50 = (round up to a whole number) x = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 510.00	listings under 37 CFR 1.52(e)),	the application size t	fee du	e is \$260 (\$130 f	onically fi or small e	iled sequence or ontity) for each ad	computer Iditional 50)
- 100 =								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 510.00 SUBMITTED BY Registration No. 57 866 Telephone 617 646 2000							Fee F	Paid (\$)
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1401 Notice of appeal 510.00 SUBMITTED BY Registration No. 57 866 Telephone 617 646 2000	·			(loging up to a WNO	e number)	^		Daid (#)
SUBMITTED BY Signature Registration No. 57 866 Telephone 617 646 2000	` ,	0 fee (no small entity	/ disco	ount)			rees	raiu (\$)
Signature SO H) addra Registration No. 57 966 Telephone 617 646 9000							51	0.00
	SUBMITTED BY		-		-			
	Signature Saff	Leurs			57,866	Telephone	617.646	.8000
	Name (Print/Type) Scott J. Gerwin			· · · · · · · · · · · · · · · · ·		Date	April 10,	2008

	Certificate of Electronic Filing Under 37 CFR 1.8
I hereby certify that this paper (along with an)	y paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing
system in accordance with § 1.6(a)(4).	
Dated: April 10, 2008	Signature: Ween MacKenzie (Eileen M. MacKenzie)
2000 April 10, 2000	Cignature